## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

10/596142

FILING DATE

APPLICANT(S)

| AL. | A   | Th | 40         |
|-----|-----|----|------------|
| CL  | 463 | ш  | <b>419</b> |

|                  | AS FILED    |           | AFTER<br>1*AMENDMENT |              | AFTER<br>1 MANIENDMENT |              |
|------------------|-------------|-----------|----------------------|--------------|------------------------|--------------|
|                  | IND.        | DEP.      | IND.                 | DEP.         | IND.                   | DEP.         |
|                  |             |           |                      |              |                        |              |
| 2                |             |           |                      |              |                        |              |
| 3                |             |           |                      |              | ~~~                    |              |
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| 8                |             |           |                      |              |                        |              |
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| 12               |             |           |                      |              |                        |              |
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| 17<br>18         |             |           |                      |              |                        |              |
| 19               | ····        |           |                      |              |                        |              |
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| 30               |             | -         |                      |              |                        |              |
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| 34<br>35         |             |           |                      |              |                        |              |
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| 47               |             |           |                      | <b> </b>     | <b></b>                | <del> </del> |
| 48.              | <del></del> |           |                      | <del> </del> | <b>[</b>               | <del> </del> |
| 49               |             |           |                      | <b> </b>     | <b></b>                | 1            |
| 50               |             |           | -                    | A            |                        |              |
| TOTAL END.       |             | 1         | . 2                  | 4            |                        | 1            |
| TOTAL DEP.       |             | <b>4</b>  | 9                    | <b>4</b> π   |                        | 44           |
| TOTAL.<br>CLABES |             |           | . 11                 |              |                        | 1000         |

|            | ASE         | ILED               | AFTER  |               | · APTER                                       |                 |
|------------|-------------|--------------------|--|---------------|---|-----------------|
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|            | IND.        | DEP.               | IND.   | DEP.          | IND.  |                 |
| 51<br>52   |             |                    |  |               |   |                 |
| 53         |             |                    | ,  |               |   |                 |
| 54         | <del></del> | <b> </b>           | <del></del>                                      |               |   |                 |
| 55         |             |                    | ļ  | <u>-</u>      |   |                 |
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| 57         |             |                    | <del>,</del>                                     |               |   |                 |
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| 59         |             |                    |  |               |   |                 |
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| 61         |             | •                  |  |               | · · · · · ·                                   |                 |
| 62         |             |                    |  |               |   |                 |
| 63         | <u> </u>    |                    |  |               |   | · · · · · ·     |
| 64 -<br>65 |             |                    |  |               |   |                 |
| 66         |             |                    | ļ  |               |   |                 |
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| 72         |             |                    |  |               |   | 22              |
| 73<br>74   |             |                    |  |               |   |                 |
| 75         |             |                    |  |               |   |                 |
| 76         |             |                    |  |               |   |                 |
| 77         |             |                    |  |               |   | 3               |
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| 79.        |             | ·                  |  | ١ .           |   |                 |
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| 81<br>82   |             |                    |  |               |   | -               |
| 83<br>83   |             |                    |  |               | ļ   |                 |
| 84         |             |                    |  |               |   |                 |
| 85         |             |                    |  |               |   | l               |
| 86         |             |                    | <del>                                     </del> |               |   |                 |
| 87         |             |                    |  |               | -   |                 |
| 88         |             |                    |  |               |   |                 |
| 89         |             |                    |  |               |   |                 |
| 90         |             | i                  |  |               |   |                 |
| 91         |             |                    | ļ  | <u> </u>      | <b>ا</b> ــــــــــــــــــــــــــــــــــــ | ļ               |
| 92<br>93   |             | l                  | ļ  | l             | <b></b>                                       |                 |
| 94         |             | I                  |  | <b> </b>      | Ĭ   | ····            |
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| 97         | 1           |                    | ł  |               |   |                 |
| 98         |             |                    | · · · · · ·                                      |               |   |                 |
| 99         |             |                    |  |               |   |                 |
| 100        |             |                    |  |               |   |                 |
| TOTAL IND. |             | 1                  |  | 1             |   | 1               |
| TOTALDER   |             | 4-                 |  | ] V           |   | ) <del> </del>  |
| TOTAL      |             | THE REAL PROPERTY. |  | THE           |   | Tester St       |
| CLAIMS.    |             |                    |  |               |   |                 |

U.S. DEPARTMENT of COMMERCE Fateri and Trademark Office